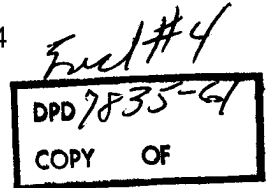




INVOICE
Itek Corporation
 Waltham 54, Massachusetts

**SOLD TO:****SHIPPED TO:****INVOICE DATE** 11/24/61**INVOICE NO.** 51**terms, net cash**

YOUR ORDER NO.	GOV'T CONTRACT NO.	SHIPPED VIA -	
			9014

PERIOD COVERED: INCEPTION THRU 11/15/61

Direct Labor	\$ 81,100.88
Overhead	126,002.70
Material	92,348.69
Sub-Contract	11,349.64
Other Direct Charges	30,586.45
Total Manufacturing Cost	341,388.36
G&A	34,888.90
Total	376,277.26
Previously Billed by Itek	375,711.94
Net Amount Due on this Invoice	<u>\$ 565.32</u>

"I certify that the above bill is correct and just and that payment has not been received. Payment is requested on a provisional basis pending the establishment of accepted overhead rates."

		STAT
		STAT

-9014-

Invoice No. 51

PERIOD COVERED: 11/1 - 11/16/61

Direct Labor

Engineering	\$ 196.65
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Overhead

Engineering @ 150%	294.98
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Material

8.65

Total Manufacturing Cost

500.28

G & A @ 13%

65.04

Total

\$ 565.32

Form 1822
4-61

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. _____

Page 1 of 1

PAID BY

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO ITEK Corporation
(Payee)
Boston, Massachusetts
(Address)

Contract No. BB-375 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____
Shipped from _____ to _____ Weight _____ Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		<u>Invoice No.</u>				
		49 (Orig. Inv. Att)				\$1,141.01
		50 (Orig. Inv; Att)				1,775.55
		51 (Orig. Inv. Att)				565.32
TOTAL						\$3,481.88

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE

ACCOUNTING CLASSIFICATION (Appropriation Symbol)

20 DEC 1961

(Date)

(Signature of Approving Officer)

STAT

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____
(Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____